



UNITED STATES PATENT AND TRADEMARK OFFICE

UNITED STATES DEPARTMENT OF COMMERCE
 United States Patent and Trademark Office
 Address: COMMISSIONER FOR PATENTS
 P.O. Box 1450
 Alexandria, Virginia 22313-1450
www.uspto.gov



Bib Data Sheet

CONFIRMATION NO. 1949

| | | | | |
|-----------------------------|--|--------------|------------------------|-------------------------------------|
| SERIAL NUMBER 10/041,040 | FILING OR 371(c) DATE 12/28/2001 RULE | CLASS 714 | GROUP ART UNIT 2133 | ATTORNEY DOCKET NO. 42390.P13767 |
|-----------------------------|--|--------------|------------------------|-------------------------------------|

APPLICANTS

Gary Solomon, Action, MA;
 David Harriman, Portland, OR;
 Jasmin Ajanovic, Portland, OR;

** CONTINUING DATA *****

** FOREIGN APPLICATIONS *****

IF REQUIRED, FOREIGN FILING LICENSE GRANTED **

02/04/2002

| | | | | | |
|---------------------------------|--|------------------------|----------------------|----------------------------------|--------------------------------------|
| Foreign Priority claimed | <input type="checkbox"/> yes <input checked="" type="checkbox"/> no | STATE OR COUNTRY MA | SHEETS DRAWING 11 | TOTAL CLAIMS 17 15 | INDEPENDENT CLAIMS 8 4 |
| 35 USC 119 (a-d) conditions met | <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance | | | | |
| Verified and Acknowledged | Examiner's Signature _____ Initials _____ | | | | |

ADDRESS

BLAKELY, SOKOLOFF, TAYLOR & ZAFMAN LLP
 Seventh Floor
 12400 Wilshire Boulevard
 Los Angeles, CA90025-1026

TITLE

Method and apparatus for signaling an error condition to an agent not expecting a completion

| | | |
|-----------------------------|--|---|
| FILING FEE RECEIVED 1270 | FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT. No. _____ for following: | <input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit |
|-----------------------------|--|---|